South Bend Police Methamphetamine Laboratory Occurrence Report This form complies with the standary requirement set forth in IC 5-2-15-3.

Date:	98-20-12	Address:	1156 Hillcrest	
Case #:	12-12973		South Bend, IN	
County:	St. Joseph			
Type of La	aboratory Scizure (check one)	Seizure Location (theck all that apply)	
Operation Chemic Dumpsi	al/Glassware/Equipment (only)	□ Residence □ Outbuilding □ Vehicle	☐ Hotel/Motel ☐ Open – No Structure ☐ Other;	
Items Found: Location (bedroom, kitchen, open air. etc)				
(check all that apply) \[\sum \text{Lithium/Ammonia Reaction(s): \overline{One-pot reaction vessel - bathroom} \]				
☐ Red Phosphorous/Iodine Reaction(s):				
Flammable Solvents: Coleman fuel - bathroom				
Water Reactive Metal (Lithium): Stripped batteries - bathroom				
Anhydrous Ammonia:				
Hydrochloric Acid Gas Generator(s):				
Corrosive Acid:				
Corrosive Base: <u>Lye - bathroom</u>				
Other (item and location):				
☐ Yes _ ⊠ No	er age 18 discovered (check one) (mumber present) gort to Child Protective Services	Ephedrin	e Information e/Pseudoephedrine Tracking Log erchant Tip —	
This report is to be faxed to the following agencies that serve the location:				
Fire Department: South Bend FD		-	Fax: 235-9305	
Health Department: St. Joe County Health Dept		Fax: <u>235-9</u> Fax:		
Child Prote	ection Service:		•	
For further information regarding this methamphetamine laboratory, contact Investigating Officer: Michael S. Suh Phone 574-235-9406				
** This form is to be fixed to the Pire Department, Health Department and/or Child Protective Services Department				

- listed within 24 hours of scene processing.

 *** This form is to be included with the case life, and a copy sent to the Claudestine Laboratory Team Leader for retention.